FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees 3M DISCLOSURE of for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

2015 JAN 23 AM II: 30 IA ETHICS AND

Effective May 1, 2010, all statements and reports for State PA

Parties must be filed electroni	cally. Reset Fi	orm		
COMMITTEE NAME (Must be same as on Statement of Org	THE PROPERTY OF THE PROPERTY O			
Shaw for Mayor Committee	ganization)		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Cand Subdivision Candidate (8)County PAC (9)City PAC (10)School 11)Local Ballot Issue	(2)State PAC (3)State Party	al C (DR-2 (Rev. 12/2009) DISCLOSURE REPORT For Office Use Only	
CANDIDATE COMMITTEES ONLY: Candidate Name Kelly B. Shaw	Political Party (if applicable)		Comm. # 1423 () Logged In Scanned	
Office Sought Mayor, City of Indianola, Iowa		Audited		
Late reports are subject to possible civil and criminal penalties. Pucandidate's committee, and the chairperson, for any other type of Signature of Person Filing Report	stream to lowa Code sections 68B.32. committee, is the individual responsib	A(7) and 68 le for filing	3A.401(3), the candidate, for a timely and accurate reports.	
AM FILING A Campaign Disclosure Form non-election years	ear REPORT FOR (1) ELECTION	L //2\NON	EL FOTION VENE	
(report date)	Indicate by	# 2	ELECTION YEAR.	
CHECK IF AMENDMENT TO REPORT DATED				
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3.	Novemb	mittees, enter Date of Election er 5, 2013 Local Committees, enter County in tion is held	
STATEMENT OF CASH ON HAND		COLUMN THE COLUMN	THE RESIDENCE OF THE PARTY OF T	
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fire.)	tal of all funds held by the	\$	5.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD		•		
Schedule A: Cash Contributions total (Attach Schedu	ale A) (*also see in-kind below)		40.00	
Schedule F: Loans Received total (Attach Schedule			40.00	
Schedule H. Total Salos of Compains Decree 4 (4)	F)		0	
Attac	F) ch Schedule H)		5.1532	
(Schedule H applies to Candidates' Comm	ch Schedule H)		5.1532	
(Schedule H applies to Candidates' Comm	ch Schedule H)		5.1532	
(Schedule H applies to Candidates' Comm	ch Schedule H) nittees Only) SUB-TOTAL	\$	0 0 45.00	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (ch Schedule H) nittees Only) SUB-TOTAL **also see debts and loans below)	\$	0 0 45.00 25.75	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule	SUB-TOTAL **also see debts and loans below)	\$	0 0 45.00 25.75	
Schedule H applies to Candidates' Comm SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule ASH ON HAND at the end of this reporting period (if final reporting period)	sub-Total **also see debts and loans below) by the balance must be zero)	\$	0 0 45.00 25.75	
Subtract total Money Spent This Period Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule ASH ON HAND at the end of this reporting period (if final repo	sub-total (a) sub-total (b) sub-total (b) sub-total (c) su	\$ \$	0 0 45.00 25.75	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule ASH ON HAND at the end of this reporting period (if final reporting by the schedule D)	sub-total et and loans below) **also see debts and loans below) by F) ort balance must be zero)	\$ \$	0 0 45.00 25.75 0 19.25	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule ASH ON HAND at the end of this reporting period (if final reporting Delicity (From Schedule D) - Attach Schedule D) - Attach Schedule D - Attac	sub-total et and loans below) **also see debts and loans below) by F) ort balance must be zero)	\$ \$	0 0 45.00 25.75 0 19.25	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule B) ASH ON HAND at the end of this reporting period (if final reporting period (if final reporting by the schedule D) N KIND CONTRIBUTIONS (From Schedule E - Attach Schedule OUTSTANDING LOANS (From Schedule F - Attach Schedule ONSULTANT BREAKDOWN (Schedule G Attached?)	sub-total et and loans below) **also see debts and loans below) by F) ort balance must be zero)	\$ \$	0 0 45.00 25.75 0 19.25 0 0	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule ASH ON HAND at the end of this reporting period (if final reporting period (if final reporting Deriod (if final reporting	**also see debts and loans below) ort balance must be zero) ule E)	\$ \$	0 0 45.00 25.75 0 19.25 0 0 0 VES X NO	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ort balance must be zero) ule E) th Schedule H)	\$ \$ \$ \$ \$ \$ \$	0 0 45.00 25.75 0 19.25	

For Instructions, See Back of Form

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Reset	rorm

SCHEDULE	
A (Rev. 12/13)	MONETARY RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization Shaw for Mayor Committee	n)

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER
	ID#	Kelly Shaw			INCOME
9/18/2014	CK#	101 Phillp Pl	self	\$40.00	
	ID#	Indianola, IA 50125			
	CK#				
	ID#				
	CK#				
	ID#				
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	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL		-
		TOTAL (if last page	of this ashadul	\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable" in the relationship column.

Page _ _ of ___ familial relationship.

40.00

(for Schedule A)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT DISUR

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be	same as on Statement	of Organization)
Shaw for Mayor Committee		or organization)

	CANDIDATE	NAME AND ADDRESS TO WILLIAM		
DATE EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID# 14230	EDJE Technologies	Domain name Assess1 D	
09/19/14	CK#	P.O. Box 703 Indianola, Iowa 50125	Domain name Annual Renewal Fee www.shawforindianola.com	\$ 25.75
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 25.75
			TOTAL (if last page of this schedule)	\$ 25.75

THIS	BOX	APPLIES	ТО	CANDIDATES'	COMMITTEES	ONI V
		MADE TO SOURCE		THE PRINCE	COMMINITIES	UNLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

1	1
Page	of